

FORM C/OH
COVER SHEET PG 1

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CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

15 C/OH NAME

Mr Julian Castro

16 ACCOUNT # (Ethics Commission files)**17 NOTICE
FROM
POLITICAL
COMMITTEE(S)**

**** This box is for notice of political expenditures by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures. ****

COMMITTEE TYPE☐ GENERAL☐ SPECIFIC**COMMITTEE NAME****COMMITTEE ADDRESS****COMMITTEE CAMPAIGN TREASURER NAME****COMMITTEE CAMPAIGN TREASURER ADDRESS**☐ additional pages**18 CONTRIBUTION
TOTALS**

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED

\$941.00

2. TOTAL POLITICAL CONTRIBUTIONS
(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$48512.50

**EXPENDITURE
TOTALS**

3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED

\$0

4. TOTAL POLITICAL EXPENDITURES

\$0

**CONTRIBUTION
BALANCE**

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY
OF REPORTING PERIOD

\$104733.58

**OUTSTANDING
LOAN TOTALS**

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE
LAST DAY OF THE REPORTING PERIOD

\$0

19 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Mr Julian Castro, this the 04th day
of May, 20 05, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath



POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A:

1 of 27

2 FILER NAME

Mr Julian Castro

3 ACCOUNT # (Ethics Commission filers)

4 Date

4/29/2005

5 Full name of contributor

☐ out-of-state PAC (ID# _____)

Mr James L Phillips MD

6 Contributor address; City; State; Zip Code

3127 La Quinta Dr.
Missouri, TX 77459

7 Amount of
contribution (\$)
50.00

8 In-kind contribution
description (if applicable)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

4/29/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Mr Daniel Ortiz

Contributor address; City; State; Zip Code

401 Holland Ave., Apt/Suite: 117
San Antonio, TX 78212

Amount of
contribution (\$)
1000.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/29/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Mr Joe Velasquez

Contributor address; City; State; Zip Code

3050 K. Street NW, Apt/Suite: 160
Washington, DC 20003

Amount of
contribution (\$)
100.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/29/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

I.B.E.W. - C.O.P.E.

Contributor address; City; State; Zip Code

1125 15th St. NW
Washington, DC 20005

Amount of
contribution (\$)
1000.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/29/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Mr Marco A Heras

Contributor address; City; State; Zip Code

1 Address Not On Check Not located despite best effort
San Antonio, TX 78215

Amount of
contribution (\$)
500.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.



POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A:

2 of 27

2 FILER NAME

Mr Julian Castro

3 ACCOUNT # (Ethics Commission filers)

4 Date

4/29/2005

5 Full name of contributor

☐ out-of-state PAC (ID# _____)

La Estrella de Arte

6 Contributor address; City; State; Zip Code

612 W. Commerce
San Antonio, TX 78207

7 Amount of
contribution (\$)

100.00

8 In-kind contribution
description (if applicable)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

4/29/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Capital Consultants Marketing

Contributor address; City; State; Zip Code

1984 North FM 730
Decatur, TX 76234

Amount of
contribution (\$)

250.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/29/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Uni-Trade Forwarding, L.C.

Contributor address; City; State; Zip Code

130 Flecha Lane
Laredo, TX 78045

Amount of
contribution (\$)

500.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/29/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Mr Albert S Jacquez

Contributor address; City; State; Zip Code

2403 Lellah Ct.
Dunn Loring, VA 22027

Amount of
contribution (\$)

250.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/29/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Mr David Milam

Contributor address; City; State; Zip Code

4550 Allent St.
Houston, TX 77007

Amount of
contribution (\$)

100.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A:
3 of 27

2 FILER NAME

Mr Julian Castro

3 ACCOUNT # (Ethics Commission filers)

4 Date

4/29/2005

5 Full name of contributor

☐ out-of-state PAC (ID# _____)

Dr. R.S. Preissig MD

6 Contributor address; City; State; Zip Code

11814 Mill Rock Rd.
San Antonio, TX 78230

7 Amount of
contribution (\$)
250.00

8 In-kind contribution
description (if applicable)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

4/29/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Mr Vincent E Zinsmeyer

Contributor address; City; State; Zip Code

19910 Messina
San Antonio, TX 78258

Amount of
contribution (\$)
100.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/29/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Paisano Interests

Contributor address; City; State; Zip Code

16350 Park Ten Pl., Apt/Suite: 120
Houston, TX 77084

Amount of
contribution (\$)
150.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/29/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

TSC Fund

Contributor address; City; State; Zip Code

6250 Westpark, Apt/Suite: 200
Houston, TX 77057

Amount of
contribution (\$)
250.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/29/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Mr F Paul Celauro

Contributor address; City; State; Zip Code

5326 McCullough Cir.
Houston, TX 77056

Amount of
contribution (\$)
1000.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.



POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A:
4 of 27

2 FILER NAME

Mr Julian Castro

3 ACCOUNT # (Ethics Commission filers)

4 Date

4/29/2005

5 Full name of contributor

☐ out-of-state PAC (ID# _____)

Mr Derrek R Weaver

6 Contributor address; City; State; Zip Code

502 Castano Ave.
San Antonio, TX 78209

7 Amount of
contribution (\$)
100.00

8 In-kind contribution
description (if applicable)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

4/29/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Ms Beatriz Lansdale

Contributor address; City; State; Zip Code

123 Cloverleaf
San Antonio, TX 78209

Amount of
contribution (\$)
100.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/29/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Mr Sean Burton

Contributor address; City; State; Zip Code

2478 Devonport Lane
Los Angeles, CA 90077

Amount of
contribution (\$)
100.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/29/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Mr Albert C Becken III

Contributor address; City; State; Zip Code

723 Fabulous Dr.
San Antonio, TX 78216

Amount of
contribution (\$)
500.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/29/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Pinatas Y Mas-Pinataland

Contributor address; City; State; Zip Code

1706 S. Presa
San Antonio, TX 78210

Amount of
contribution (\$)
40.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A:
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2 FILER NAME

Mr Julian Castro

3 ACCOUNT # (Ethics Commission filers)

4 Date

4/29/2005

5 Full name of contributor

Ms Anita R Torres

☐ out-of-state PAC (ID# _____)

7 Amount of
contribution (\$)
25.00

8 In-kind contribution
description (if applicable)

6 Contributor address; City; State; Zip Code

3606 Betsy Ross Dr.
San Antonio, TX 78230

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

4/29/2005

Full name of contributor

Mr Melicio Flores

☐ out-of-state PAC (ID# _____)

Amount of
contribution (\$)
255.00

In-kind contribution
description (if applicable)

Contributor address; City; State; Zip Code

243 Castroville Rd.
San Antonio, TX 78207

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/29/2005

Full name of contributor

Ms Carolina V Hahn

☐ out-of-state PAC (ID# _____)

Amount of
contribution (\$)
45.00

In-kind contribution
description (if applicable)

Contributor address; City; State; Zip Code

814 Crestview Dr.
San Antonio, TX 78228

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/29/2005

Full name of contributor

Mr Randal D Bassett

☐ out-of-state PAC (ID# _____)

Amount of
contribution (\$)
100.00

In-kind contribution
description (if applicable)

Contributor address; City; State; Zip Code

100 E. Anderson Ln., Apt/Suite: 200
Austin, TX 78752

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/29/2005

Full name of contributor

Mr Steven J Durham

☐ out-of-state PAC (ID# _____)

Amount of
contribution (\$)
100.00

In-kind contribution
description (if applicable)

Contributor address; City; State; Zip Code

13220 Kerrville Folkway
Austin, TX 78729

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.



POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages Schedule A: 6 of 27	
2 FILER NAME Mr Julian Castro		3 ACCOUNT # (Ethics Commission filers)	
4 Date 4/29/2005	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ms Beatrice Covey 6 Contributor address; City; State; Zip Code PO Box 461406 San Antonio, TX 78246	7 Amount of contribution (\$) 1000.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 4/29/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ms Emily D Thuss Contributor address; City; State; Zip Code 215 E. Huisache San Antonio, TX 78212	Amount of contribution (\$) 50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/29/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ms Celeste A Calderon Contributor address; City; State; Zip Code 68 A.W. Narragansett Ave. Newport, RI 02840	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/29/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mr John L Parten Contributor address; City; State; Zip Code 308 Leigh St. San Antonio, TX 78210	Amount of contribution (\$) 25.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/29/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mr Paul Covey Contributor address; City; State; Zip Code PO Box 461406 San Antonio, TX 78246	Amount of contribution (\$) 500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.



POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A:

7 of 27

2 FILER NAME

Mr Julian Castro

3 ACCOUNT # (Ethics Commission filers)

4 Date

4/29/2005

5 Full name of contributor

☐ out-of-state PAC (ID# _____)

Ms Sylvia R Garcia

6 Contributor address; City; State; Zip Code

PO Box 8530
Houston, TX 77249

7 Amount of
contribution (\$)
250.00

8 In-kind contribution
description (if applicable)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

4/29/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Mr Macedonio Villarreal Jr.

Contributor address; City; State; Zip Code

2315 Madewood
Missouri City, TX 77459

Amount of
contribution (\$)
500.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/29/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Ms Christel Villarreal

Contributor address; City; State; Zip Code

162 Harcourt
San Antonio, TX 78223

Amount of
contribution (\$)
50.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/29/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Ms Jacqueline Castro

Contributor address; City; State; Zip Code

6212 Olympia Dr.
Houston, TX 77057

Amount of
contribution (\$)
500.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/29/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Mr Kenneth M Struzyk

Contributor address; City; State; Zip Code

21021 Hickory Bend
Garden Ridge, TX 78266

Amount of
contribution (\$)
500.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.



POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A:
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2 FILER NAME

Mr Julian Castro

3 ACCOUNT # (Ethics Commission filers)

4 Date

4/29/2005

5 Full name of contributor

☐ out-of-state PAC (ID# _____)

Mr Michael C Elrod

6 Contributor address; City; State; Zip Code

125 Kennedy Ave.
San Antonio, TX 78209

7 Amount of
contribution (\$)
250.00

8 In-kind contribution
description (if applicable)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

4/29/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Mr Paul Foster

Contributor address; City; State; Zip Code

1815 Fieldstone Rd.
San Antonio, TX 78232

Amount of
contribution (\$)
350.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/29/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Dr Arthur Centeno

Contributor address; City; State; Zip Code

33600 Smithson Valley Rd.
Bulverde, TX 78163

Amount of
contribution (\$)
1000.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/29/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Ms Laura Wing

Contributor address; City; State; Zip Code

222 Laclede Ave.
San Antonio, TX 78214

Amount of
contribution (\$)
100.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/29/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Mr Brent D DeMoss

Contributor address; City; State; Zip Code

6298 Lockhill Rd. , Apt/Suite: 1702
San Antonio, TX 78240

Amount of
contribution (\$)
50.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A:
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2 FILER NAME

Mr Julian Castro

3 ACCOUNT # (Ethics Commission filers)

4 Date

4/29/2005

5 Full name of contributor

☐ out-of-state PAC (ID# _____)

Dr Dianne M Burns MD

6 Contributor address; City; State; Zip Code

131 Manchester Way
San Antonio, TX 78249

7 Amount of
contribution (\$)
100.00

8 In-kind contribution
description (if applicable)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

4/29/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Mr Albert McKnight

Contributor address; City; State; Zip Code

721 S. Presa
San Antonio, TX 78210

Amount of
contribution (\$)
200.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/29/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Mr Kenneth Lowe

Contributor address; City; State; Zip Code

40 NE Loop 410, Apt/Suite: 530
San Antonio, TX 78216

Amount of
contribution (\$)
200.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/29/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Mr Rolando H Briones III

Contributor address; City; State; Zip Code

410 Westmoreland
San Antonio, TX 78213

Amount of
contribution (\$)
1000.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/29/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Mr & Mrs Russell Ivy

Contributor address; City; State; Zip Code

PO Box 1404
Alvin, TX 77512

Amount of
contribution (\$)
2000.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A:
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2 FILER NAME

Mr Julian Castro

3 ACCOUNT # (Ethics Commission filers)

4 Date

4/29/2005

5 Full name of contributor

☐ out-of-state PAC (ID# _____)

Ms Carolyn D Lee

6 Contributor address; City; State; Zip Code

1256 E. Sunshine
San Antonio, TX 78228

7 Amount of
contribution (\$) **250.00**

8 In-kind contribution
description (if applicable)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

4/29/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Mr Gerald W Lee

Contributor address; City; State; Zip Code

1226 E. Sunshine
San Antonio, TX 78228

Amount of
contribution (\$) **500.00**

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/29/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Mr & Mrs James and Donna Dodds

Contributor address; City; State; Zip Code

2230 Kleinert Ave.
Baton Rouge, LA 70806

Amount of
contribution (\$) **2000.00**

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/29/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

R.L. Emery & Co.

Contributor address; City; State; Zip Code

4731 Whirlwind Dr.
San Antonio, TX 78217

Amount of
contribution (\$) **500.00**

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/29/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Texas Weston PAC

Contributor address; City; State; Zip Code

5599 San Felipe St., Apt/Suite: 700
Houston, TX 77056

Amount of
contribution (\$) **500.00**

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.



POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A:

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2 FILER NAME

Mr Julian Castro

3 ACCOUNT # (Ethics Commission filers)

4 Date

4/29/2005

5 Full name of contributor

☐ out-of-state PAC (ID# _____)

Texas Weston PAC

7 Amount of contribution (\$)

500.00

8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code

5599 San Felipe St., Apt/Suite: 700
Houston, TX 77056

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

4/29/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Mr & Mrs S Brad Davis

Amount of contribution (\$)

2000.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

11434 Whisper Dawn
San Antonio, TX 78230

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/29/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Ms Julie E Kenfield

Amount of contribution (\$)

250.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

9422 Gloxinia Dr.
Garden Ridge, TX 78266

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/29/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Interstate Chevron

Amount of contribution (\$)

100.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

2207 IH 35 N
San Antonio, TX 78208

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/29/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Ms Shannon Livingston

Amount of contribution (\$)

2000.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

13300 Old Blanco Road, Apt/Suite: 325
San Antonio, TX 78216

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.



POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A:

12 of 27

2 FILER NAME

Mr Julian Castro

3 ACCOUNT # (Ethics Commission filers)

4 Date

4/29/2005

5 Full name of contributor

☐ out-of-state PAC (ID# _____)

Mr Victor Resendez

6 Contributor address; City; State; Zip Code

941 W. Pyron
San Antonio, TX 78221

7 Amount of
contribution (\$)
100.00

8 In-kind contribution
description (if applicable)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

4/29/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Dr Juan A Reyna MD

Contributor address; City; State; Zip Code

10002 Lazy J Trail
Helotes, TX 78023

Amount of
contribution (\$)
250.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/29/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Mr Andrew M Murstein

Contributor address; City; State; Zip Code

960 Park Ave.
New York, NY 10028

Amount of
contribution (\$)
1000.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/29/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Mr Robert P Arias

Contributor address; City; State; Zip Code

221 Meadowbrook
San Antonio, TX 78232

Amount of
contribution (\$)
1000.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/30/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Mr Javier C Murillo

Contributor address; City; State; Zip Code

511 Wimberly
San Antonio, TX 78221

Amount of
contribution (\$)
100.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A:

13 of 27

2 FILER NAME

3 ACCOUNT # (Ethics Commission filers)

Mr Julian Castro

4 Date

4/30/2005

5 Full name of contributor

☐ out-of-state PAC (ID# _____)

Ms Betty M Eckert

7 Amount of contribution (\$)

50.00

8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code

233 W. Wildwood
San Antonio, TX 78212

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

4/30/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Mr Johnny P Hernandez

Amount of contribution (\$)

500.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

2444 Benrus Rd.
San Antonio, TX 78228

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/30/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Mr Ruben P Flores

Amount of contribution (\$)

50.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

7514 Greenbelt St.
San Antonio, TX 78251

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/30/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Ms Victoria A Guajardo

Amount of contribution (\$)

100.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

1002 Alexander Hamilton Dr.
San Antonio, TX 78228

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

4/30/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Ms Martha L Martinez-Flores

Amount of contribution (\$)

100.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

4807 Fairford St.
San Antonio, TX 78228

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A:

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2 FILER NAME

Mr Julian Castro

3 ACCOUNT # (Ethics Commission filers)

4 Date

4/30/2005

5 Full name of contributor

☐ out-of-state PAC (ID# _____)

Dr Sergio A Garza

6 Contributor address; City; State; Zip Code

126 Hillview Dr.
San Antonio, TX 78209

7 Amount of
contribution (\$)
250.00

8 In-kind contribution
description (if applicable)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

5/2/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Ms Lisa A Bombin

Contributor address; City; State; Zip Code

9426 Five Forks Dr.
San Antonio, TX 78245

Amount of
contribution (\$)
50.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/2/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

CWA - COPE PCC

Contributor address; City; State; Zip Code

501 3rd Street NW
Washington, DC 20001

Amount of
contribution (\$)
1000.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/2/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Ms Judy D Peterson

Contributor address; City; State; Zip Code

7426 Pipers Creek
San Antonio, TX 78251

Amount of
contribution (\$)
750.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/2/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Ms Jennifer M Bramble

Contributor address; City; State; Zip Code

15303 Pebble Sound
San Antonio, TX 78232

Amount of
contribution (\$)
50.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A:

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2 FILER NAME

Mr Julian Castro

3 ACCOUNT # (Ethics Commission filers)

4 Date

5/2/2005

5 Full name of contributor

☐ out-of-state PAC (ID# _____)

Mr Richard Leal

6 Contributor address; City; State; Zip Code

707 Channel Cir.
San Antonio, TX 78232

7 Amount of
contribution (\$)
100.00

8 In-kind contribution
description (if applicable)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

5/2/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Flowers by Mary

Contributor address; City; State; Zip Code

544 S. WW White Rd.
San Antonio, TX 78220

Amount of
contribution (\$)
100.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/2/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Ms Deborah M Ford

Contributor address; City; State; Zip Code

211 Hill Country Ln.
San Antonio, TX 78232

Amount of
contribution (\$)
200.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/2/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Mr Nicolas Hollis

Contributor address; City; State; Zip Code

720 Ivy Lane
San Antonio, TX 78209

Amount of
contribution (\$)
1000.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/2/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Mr Bernardo Lastre

Contributor address; City; State; Zip Code

8910 Wilson Reid Drive
Houston, TX 77040

Amount of
contribution (\$)
1000.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages Schedule A: 16 of 27	
2 FILER NAME Mr Julian Castro		3 ACCOUNT # (Ethics Commission filers)	
4 Date 5/2/2005	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mr Daniel R Ramirez 6 Contributor address; City; State; Zip Code 146 Auburn Ridge Spring Branch, TX 78070	7 Amount of contribution (\$) 500.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 5/2/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ms Natalie Watkins Contributor address; City; State; Zip Code 9110 Maggie Court San Antonio, TX 78240	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 5/2/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ms Natalie Watkins Contributor address; City; State; Zip Code 9110 Maggie Court San Antonio, TX 78241	Amount of contribution (\$) 75.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 5/2/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mr Ismael Hinojosa Contributor address; City; State; Zip Code PO Box 4065 San Antonio, TX 78523	Amount of contribution (\$) 25.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 5/2/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mr Kermit Lopez Contributor address; City; State; Zip Code PO Box 4484 Albuquerque, NM 87196	Amount of contribution (\$) 50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A:

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2 FILER NAME

3 ACCOUNT # (Ethics Commission filers)

Mr Julian Castro

4 Date

5/2/2005

5 Full name of contributor

☐ out-of-state PAC (ID# _____)

Mr Fernando Tovar

6 Contributor address; City; State; Zip Code

1990 Post Oak Blvd.
Houston, TX 77056

7 Amount of contribution (\$)

250.00

8 In-kind contribution description (if applicable)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

5/2/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Mr Rafael Adame

Contributor address; City; State; Zip Code

433 Executive
El Paso, TX 79902

Amount of contribution (\$)

100.00

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/2/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Mr Robert W Miller

Contributor address; City; State; Zip Code

14215 Jones Maltsberger Road
San Antonio, TX 78247

Amount of contribution (\$)

25.00

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/2/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Mr Karl Putnam

Contributor address; City; State; Zip Code

405 Valpano
El Paso, TX 79912

Amount of contribution (\$)

25.00

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/2/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Mr Consuelo Murray

Contributor address; City; State; Zip Code

7210 Baxtershire
Dallas, TX 75230

Amount of contribution (\$)

15.00

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A:

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2 FILER NAME

Mr Julian Castro

3 ACCOUNT # (Ethics Commission filers)

4 Date

5/2/2005

5 Full name of contributor

☐ out-of-state PAC (ID# _____)

Mr Rafael Trevino

6 Contributor address; City; State; Zip Code

500 Chapparral St.
Alice, TX 78332

7 Amount of
contribution (\$)

25.00

8 In-kind contribution
description (if applicable)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

5/2/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Ms Rosa S Cruz

Contributor address; City; State; Zip Code

13315 Dubuque St.
San Antonio, TX 78249

Amount of
contribution (\$)

25.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/2/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Mr Mazhar Munir

Contributor address; City; State; Zip Code

7350 Whispering Ridge SE
Grand Rapids, MI 49546

Amount of
contribution (\$)

25.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/2/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Ms Corina DelToro

Contributor address; City; State; Zip Code

620 S. 1st St., Apt/Suite: 303
Austin, TX 78704

Amount of
contribution (\$)

25.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/2/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Independence USA

Contributor address; City; State; Zip Code

21311 North Street
New Caney, TX 77357

Amount of
contribution (\$)

20.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A:

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2 FILER NAME

Mr Julian Castro

3 ACCOUNT # (Ethics Commission filers)

4 Date

5/2/2005

5 Full name of contributor

Ms Sally Garcia

☐ out-of-state PAC (ID# _____)

7 Amount of contribution (\$)

50.00

8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code

5623 Anita St.
Dallas, TX 75206

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

5/2/2005

Full name of contributor

Ms Rhonda Wyche

☐ out-of-state PAC (ID# _____)

Amount of contribution (\$)

25.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

5139 Darnell St.
Houston, TX 77096

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/2/2005

Full name of contributor

Mr Josphe Slicker

☐ out-of-state PAC (ID# _____)

Amount of contribution (\$)

30.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

8523 Thackery St., Apt/Suite: 5105
Dallas, TX 75225

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/2/2005

Full name of contributor

Mr Mario Cavazos

☐ out-of-state PAC (ID# _____)

Amount of contribution (\$)

100.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

3509 North C. St.
McAllen, TX 78501

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/2/2005

Full name of contributor

Mr Samuel Filler

☐ out-of-state PAC (ID# _____)

Amount of contribution (\$)

25.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

11711 Braesview
San Antonio, TX 78213

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages Schedule A: 20 of 27	
2 FILER NAME Mr Julian Castro		3 ACCOUNT # (Ethics Commission filers)	
4 Date 5/2/2005	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ms Suzanne Cooke 6 Contributor address; City; State; Zip Code 9901 Oakmont Ct. Rowlett, TX 75089	7 Amount of contribution (\$) 20.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 5/2/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mr Sam Tune Contributor address; City; State; Zip Code 2512 Monarch Austin, TX 78748	Amount of contribution (\$) 10.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 5/3/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Caste Ridge Investments LP Contributor address; City; State; Zip Code 8008 W. Military Dr. San Antonio, TX 78227	Amount of contribution (\$) 150.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 5/3/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Caste Ridge Mortuary, L.P. Contributor address; City; State; Zip Code 8008 W. Military Dr. San Antonio, TX 78227	Amount of contribution (\$) 200.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 5/3/2005	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ms Gloria R Uribe Contributor address; City; State; Zip Code 202 W. Hollywood Ave. San Antonio, TX 78212	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A:

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2 FILER NAME

Mr Julian Castro

3 ACCOUNT # (Ethics Commission filers)

4 Date

5/3/2005

5 Full name of contributor

☐ out-of-state PAC (ID# _____)

Mr Manuel S Perez

6 Contributor address; City; State; Zip Code

56 Vaughan Pl.
San Antonio, TX 78201

7 Amount of
contribution (\$)
1000.00

8 In-kind contribution
description (if applicable)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

5/3/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Mr Felipa Morales

Contributor address; City; State; Zip Code

8614 London Heights
San Antonio, TX 78254

Amount of
contribution (\$)
750.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/3/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Mr Edward L Bravenec

Contributor address; City; State; Zip Code

509 King William
San Antonio, TX 78204

Amount of
contribution (\$)
250.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/3/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Mr Marc A Harrison

Contributor address; City; State; Zip Code

13047 Chimney Oak Dr.
San Antonio, TX 78249

Amount of
contribution (\$)
200.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/3/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Mr Tammy Guerra

Contributor address; City; State; Zip Code

175 E. Houston Room 10-D-90
San Antonio, TX 78205

Amount of
contribution (\$)
1000.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A:

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2 FILER NAME

Mr Julian Castro

3 ACCOUNT # (Ethics Commission filers)

4 Date

5/3/2005

5 Full name of contributor

☐ out-of-state PAC (ID# _____)

Ms Veronica Diaz

6 Contributor address; City; State; Zip Code

370 Pike Rd.
San Antonio, TX 78209

7 Amount of
contribution (\$)
1000.00

8 In-kind contribution
description (if applicable)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

5/3/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Ms Linda Bocanegra

Contributor address; City; State; Zip Code

1939 SW 19th
San Antonio, TX 78207

Amount of
contribution (\$)
200.00

In-kind contribution
description (if applicable)

Food

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/3/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Mr Armando Trevino

Contributor address; City; State; Zip Code

302 Beverly
San Antonio, TX 78228

Amount of
contribution (\$)
500.00

In-kind contribution
description (if applicable)

Food

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/3/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Ms Dolores Trevino

Contributor address; City; State; Zip Code

7500 Callaghan Rd.
San Antonio, TX 78229

Amount of
contribution (\$)
500.00

In-kind contribution
description (if applicable)

Food & Water

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/3/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Mr Richard Espinoza

Contributor address; City; State; Zip Code

2602 W. Huisache
San Antonio, TX 78228

Amount of
contribution (\$)
25.00

In-kind contribution
description (if applicable)

Water

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A:

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2 FILER NAME

Mr Julian Castro

3 ACCOUNT # (Ethics Commission filers)

4 Date

5/3/2005

5 Full name of contributor

Ms Emelda Sanchez

☐ out-of-state PAC (ID# _____)

6 Contributor address; City; State; Zip Code

927 Queens Oak
San Antonio, TX 78258

7 Amount of contribution (\$)

500.00

8 In-kind contribution description (if applicable)

Food

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

5/3/2005

Full name of contributor

Ms Emily Arvizo

☐ out-of-state PAC (ID# _____)

Contributor address; City; State; Zip Code

7988 Pepper Trail
San Antonio, TX 78244

Amount of contribution (\$)

400.00

In-kind contribution description (if applicable)

Event Expenses

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/3/2005

Full name of contributor

Mr Juan Chavez

☐ out-of-state PAC (ID# _____)

Contributor address; City; State; Zip Code

7988 Pepper Trail
San Antonio, TX 78244

Amount of contribution (\$)

1000.00

In-kind contribution description (if applicable)

Event Expenses

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/3/2005

Full name of contributor

Ms Bisli Vasquez

☐ out-of-state PAC (ID# _____)

Contributor address; City; State; Zip Code

2800 NE Loop 410
San Antonio, TX 78218

Amount of contribution (\$)

400.00

In-kind contribution description (if applicable)

Event Expenses

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/3/2005

Full name of contributor

Mr & Mrs Mike and Leroy Favela

☐ out-of-state PAC (ID# _____)

Contributor address; City; State; Zip Code

918 Hoefgen
San Antonio, TX 78210

Amount of contribution (\$)

2000.00

In-kind contribution description (if applicable)

Event Expenses

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.



POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A:

24 of 27

2 FILER NAME

Mr Julian Castro

3 ACCOUNT # (Ethics Commission filers)

4 Date

5/3/2005

5 Full name of contributor

☐ out-of-state PAC (ID# _____)

Mr Rene Martinez

6 Contributor address; City; State; Zip Code

4841 Fredericksburg
San Antonio, TX 78229

7 Amount of contribution (\$)

250.00

8 In-kind contribution description (if applicable)

Food

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

5/3/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Ms Melinda Mireles

Contributor address; City; State; Zip Code

3630 Culebra
San Antonio, TX 78228

Amount of contribution (\$)

30.00

In-kind contribution description (if applicable)

Food

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/3/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Mr Andrew Lincoln

Contributor address; City; State; Zip Code

1220 E. Commerce
San Antonio, TX 78205

Amount of contribution (\$)

500.00

In-kind contribution description (if applicable)

Food

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/3/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Mr Theodore Chandler

Contributor address; City; State; Zip Code

2843 Webster St., Apt/Suite: 305
San Francisco, CA 94123

Amount of contribution (\$)

50.00

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/3/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Mr Adrian Juarez

Contributor address; City; State; Zip Code

18416 Halstead St.
Northridge, CA 91325

Amount of contribution (\$)

10.00

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A:
25 of 27

2 FILER NAME

Mr Julian Castro

3 ACCOUNT # (Ethics Commission filers)

4 Date

5/3/2005

5 Full name of contributor

☐ out-of-state PAC (ID# _____)

Mr Jose L Munoz

6 Contributor address; City; State; Zip Code

PO Box 2191
Harlingen, TX 78551

7 Amount of
contribution (\$)
100.00

8 In-kind contribution
description (if applicable)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

5/3/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Ms Heather Thompson

Contributor address; City; State; Zip Code

2222 Q. St. NW
Washington, DC 20008

Amount of
contribution (\$)
100.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/3/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Mr Albert Trevino

Contributor address; City; State; Zip Code

1427 Peterson Ave.
San Antonio, TX 78224

Amount of
contribution (\$)
50.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/3/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Mr Albert Trevino

Contributor address; City; State; Zip Code

1427 Peterson Ave.
San Antonio, TX 78224

Amount of
contribution (\$)
50.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/3/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Mr Victor Helbing

Contributor address; City; State; Zip Code

16427 Calico Creek Drive
San Antonio, TX 78247

Amount of
contribution (\$)
100.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.



POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A:
26 of 27

2 FILER NAME

Mr Julian Castro

3 ACCOUNT # (Ethics Commission filers)

4 Date

5/3/2005

5 Full name of contributor

☐ out-of-state PAC (ID# _____)

Mr Donato Arredondo

6 Contributor address; City; State; Zip Code

7765 FM 482
New Braunfels, TX 78132

7 Amount of
contribution (\$)
1000.00

8 In-kind contribution
description (if applicable)
Transportation
Expenses

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

5/3/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Mr Ulises Arredondo

Contributor address; City; State; Zip Code

7911 Wayworth Trail
San Antonio, TX 78244

Amount of
contribution (\$)
1000.00

In-kind contribution
description (if applicable)
Transportation
Expenses

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/3/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Ms Margarita Pineda

Contributor address; City; State; Zip Code

1 Address Not On Check Not located despite best
San Antonio, TX 78215

Amount of
contribution (\$)
300.00

In-kind contribution
description (if applicable)
Entertainment
Expenses

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/3/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Mr James Aleman

Contributor address; City; State; Zip Code

11818 Wheathill Dr.
San Antonio, TX 78250

Amount of
contribution (\$)
500.00

In-kind contribution
description (if applicable)
Food

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/3/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

Ms Diane Cortez

Contributor address; City; State; Zip Code

3915 San Pedro Ave.
San Antonio, TX 78212

Amount of
contribution (\$)
612.50

In-kind contribution
description (if applicable)
Food

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.



POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A:
27 of 27

2 FILER NAME

Mr Julian Castro

3 ACCOUNT # (Ethics Commission filers)

4 Date

5/3/2005

5 Full name of contributor

☐ out-of-state PAC (ID# _____)

Mr Robert O Sosa

6 Contributor address; City; State; Zip Code

238 Funston Pl.
San Antonio, TX 78209

7 Amount of
contribution (\$)
100.00

8 In-kind contribution
description (if applicable)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

Full name of contributor

☐ out-of-state PAC (ID# _____)

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

Contributor address; City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

☐ out-of-state PAC (ID# _____)

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

Contributor address; City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

☐ out-of-state PAC (ID# _____)

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

Contributor address; City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

☐ out-of-state PAC (ID# _____)

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

Contributor address; City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.



PLEDGED CONTRIBUTIONS**SCHEDULE B**

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule B:

1 of 1

2 FILER NAME**3** ACCOUNT # (Ethics Commission filers)

Mr Julian Castro

4 TOTAL OF UNITEMIZED PLEDGES:

⇒ ⇒ ⇒ ⇒ ⇒ ⇒

\$

5 Date**6** Full name of pledgor☐ out-of-state PAC (ID#:_____)**8** Amount of
pledge (\$)**9** In-kind description
(if applicable)**7** Pledgor address; City; State; Zip Code**10** Principal occupation / Job title (See Instructions)**11** Employer (See Instructions)

Date

Full name of pledgor

☐ out-of-state PAC (ID#:_____)Amount of
pledge (\$)In-kind description
(if applicable)

Pledgor address; City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of pledgor

☐ out-of-state PAC (ID#:_____)Amount of
pledge (\$)In-kind description
(if applicable)

Pledgor address; City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of pledgor

☐ out-of-state PAC (ID#:_____)Amount of
pledge (\$)In-kind description
(if applicable)

Pledgor address; City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of pledgor

☐ out-of-state PAC (ID#:_____)Amount of
pledge (\$)In-kind description
(if applicable)

Pledgor address; City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED**If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.**

LOANS**SCHEDULE E**

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule E:

1 of 1

2 FILER NAME

Mr Julian Castro

3 ACCOUNT # (Ethics Commission filers)**4** TOTAL OF UNITEMIZED LOANS:

⇒ ⇒ ⇒ ⇒ ⇒ ⇒

\$Unitemized

5 Date of loan**7** Name of lender☐ out-of-state PAC (ID#:_____)**9** Loan Amount (\$)**6** Is lender a financial institution?**8** Lender address; City; State; Zip Code**10** Interest rate**11** Maturity date**12** Principal occupation / Job title (See Instructions)**13** Employer (See Instructions)**14** Description of Collateral☐ none**15** GUARANTOR INFORMATION**16** Name of guarantor**18** Amount Guaranteed (\$)☐ not applicable**17** Guarantor address; City; State; Zip Code**19** Principal Occupation**20** Employer

Date of loan

Name of lender

☐ out-of-state PAC (ID#:_____)

Loan Amount (\$)

Is lender a financial institution?

Lender address; City; State; Zip Code

Interest rate

Maturity date

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Description of Collateral

☐ none

GUARANTOR INFORMATION

Name of guarantor

Amount Guaranteed (\$)

☐ not applicable

Guarantor address; City; State; Zip Code

Principal Occupation

Employer

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

If lender is out-of-state PAC, please see instruction guide for additional reporting requirements.



POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F:

1 of 1

2 FILER NAME**3** ACCOUNT # (Ethics Commission filers)

Mr Julian Castro

4 Date**5** Payee name**7** Amount
(\$).....
6 Payee address; City; State; Zip Code**8** Purpose of payment (See instructions regarding type of information required.)**9** .. Complete if direct expenditure to benefit C/OH ..

Candidate / Officeholder name

Office sought

Office held

Date

Payee name

Amount
(\$).....
Payee address; City; State; Zip Code

Purpose of payment (See instructions regarding type of information required.)

.. Complete if direct expenditure to benefit C/OH ..

Candidate / Officeholder name

Office sought

Office held

Date

Payee name

Amount
(\$).....
Payee address; City; State; Zip Code

Purpose of payment (See instructions regarding type of information required.)

.. Complete if direct expenditure to benefit C/OH ..

Candidate / Officeholder name

Office sought

Office held

Date

Payee name

Amount
(\$).....
Payee address; City; State; Zip Code

Purpose of payment (See instructions regarding type of information required.)

.. Complete if direct expenditure to benefit C/OH ..

Candidate / Officeholder name

Office sought

Office held

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

**POLITICAL EXPENDITURES
MADE FROM PERSONAL FUNDS****SCHEDULE G**

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages Schedule G: <div style="text-align: center;">1 of 1</div>
2 FILER NAME Mr Julian Castro		3 ACCOUNT # (Ethics Commission filers)

4 Date	<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> 5 Payee name </div> <div style="width: 45%;"> 8 Amount (\$) </div> </div> <hr style="border-top: 1px dotted black;"/> <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> 6 Payee address; City; State; Zip Code </div> <div style="width: 45%;"> <div style="border: 1px solid black; height: 40px; margin-bottom: 5px;"></div> 7 Purpose of expenditure (See instructions regarding type of information required.) </div> </div> <div style="text-align: right; padding-top: 10px;"> <input type="checkbox"/> Reimbursement from political contributions intended </div>
Date	<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> Payee name </div> <div style="width: 45%;"> Amount (\$) </div> </div> <hr style="border-top: 1px dotted black;"/> <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> Payee address; City; State; Zip Code </div> <div style="width: 45%;"> <div style="border: 1px solid black; height: 40px; margin-bottom: 5px;"></div> Purpose of expenditure (See instructions regarding type of information required.) </div> </div> <div style="text-align: right; padding-top: 10px;"> <input type="checkbox"/> Reimbursement from political contributions intended </div>
Date	<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> Payee name </div> <div style="width: 45%;"> Amount (\$) </div> </div> <hr style="border-top: 1px dotted black;"/> <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> Payee address; City; State; Zip Code </div> <div style="width: 45%;"> <div style="border: 1px solid black; height: 40px; margin-bottom: 5px;"></div> Purpose of expenditure (See instructions regarding type of information required.) </div> </div> <div style="text-align: right; padding-top: 10px;"> <input type="checkbox"/> Reimbursement from political contributions intended </div>
Date	<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> Payee name </div> <div style="width: 45%;"> Amount (\$) </div> </div> <hr style="border-top: 1px dotted black;"/> <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> Payee address; City; State; Zip Code </div> <div style="width: 45%;"> <div style="border: 1px solid black; height: 40px; margin-bottom: 5px;"></div> Purpose of expenditure (See instructions regarding type of information required.) </div> </div> <div style="text-align: right; padding-top: 10px;"> <input type="checkbox"/> Reimbursement from political contributions intended </div>
Date	<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> Payee name </div> <div style="width: 45%;"> Amount (\$) </div> </div> <hr style="border-top: 1px dotted black;"/> <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> Payee address; City; State; Zip Code </div> <div style="width: 45%;"> <div style="border: 1px solid black; height: 40px; margin-bottom: 5px;"></div> Purpose of expenditure (See instructions regarding type of information required.) </div> </div> <div style="text-align: right; padding-top: 10px;"> <input type="checkbox"/> Reimbursement from political contributions intended </div>

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED



**PAYMENT FROM POLITICAL CONTRIBUTIONS
TO A BUSINESS OF C/OH****SCHEDULE H**

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule H:

1 of 1

2 FILER NAME**3** ACCOUNT # (Ethics Commission filers)

Mr Julian Castro

4 Date**5** Business name**7** Amount
(\$).....
6 Business address; City; State; Zip Code**8** Purpose of payment (See instructions regarding type of information required.)**9** .. Complete if direct expenditure to benefit C/OH ..

Candidate / Officeholder name

Office sought

Office held

Date

Business name

Amount
(\$).....
Business address; City; State; Zip Code

Purpose of payment (See instructions regarding type of information required.)

.. Complete if direct expenditure to benefit C/OH ..

Candidate / Officeholder name

Office sought

Office held

Date

Business name

Amount
(\$).....
Business address; City; State; Zip Code

Purpose of payment (See instructions regarding type of information required.)

.. Complete if direct expenditure to benefit C/OH ..

Candidate / Officeholder name

Office sought

Office held

Date

Business name

Amount
(\$).....
Business address; City; State; Zip Code

Purpose of payment (See instructions regarding type of information required.)

.. Complete if direct expenditure to benefit C/OH ..

Candidate / Officeholder name

Office sought

Office held

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**NON-POLITICAL EXPENDITURES
MADE FROM POLITICAL CONTRIBUTIONS****SCHEDULE I**

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages Schedule I: <div style="text-align: center;">1 of 1</div>
2 FILER NAME Mr Julian Castro		3 ACCOUNT # (Ethics Commission filers)

4 Date	<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> 5 Payee name </div> <div style="width: 45%;"> 6 Payee address; City; State; Zip Code </div> </div> <div style="border-top: 1px dashed black; height: 10px; margin-top: 5px;"></div> <div style="padding-top: 5px;"> 7 Purpose of expenditure (See instructions regarding type of information required.) </div>	8 Amount (\$)
Date	<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> Payee name </div> <div style="width: 45%;"> Payee address; City; State; Zip Code </div> </div> <div style="border-top: 1px dashed black; height: 10px; margin-top: 5px;"></div> <div style="padding-top: 5px;"> Purpose of expenditure (See instructions regarding type of information required.) </div>	Amount (\$)
Date	<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> Payee name </div> <div style="width: 45%;"> Payee address; City; State; Zip Code </div> </div> <div style="border-top: 1px dashed black; height: 10px; margin-top: 5px;"></div> <div style="padding-top: 5px;"> Purpose of expenditure (See instructions regarding type of information required.) </div>	Amount (\$)
Date	<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> Payee name </div> <div style="width: 45%;"> Payee address; City; State; Zip Code </div> </div> <div style="border-top: 1px dashed black; height: 10px; margin-top: 5px;"></div> <div style="padding-top: 5px;"> Purpose of expenditure (See instructions regarding type of information required.) </div>	Amount (\$)
Date	<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> Payee name </div> <div style="width: 45%;"> Payee address; City; State; Zip Code </div> </div> <div style="border-top: 1px dashed black; height: 10px; margin-top: 5px;"></div> <div style="padding-top: 5px;"> Purpose of expenditure (See instructions regarding type of information required.) </div>	Amount (\$)

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

CREDITS (optional)**SCHEDULE K**

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule K:

1 of 1

2 FILER NAME**3** ACCOUNT # (Ethics Commission filers)

Mr Julian Castro

4 Date	5 Payor name 6 Payor address; City; State; Zip Code	8 Amount (\$)
	7 Reason for credit	
Date	Payor name Payor address; City; State; Zip Code	Amount (\$)
	Reason for credit	
Date	Payor name Payor address; City; State; Zip Code	Amount (\$)
	Reason for credit	
Date	Payor name Payor address; City; State; Zip Code	Amount (\$)
	Reason for credit	
Date	Payor name Payor address; City; State; Zip Code	Amount (\$)
	Reason for credit	

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

**CANDIDATE / OFFICEHOLDER REPORT:
DESIGNATION OF FINAL REPORT****FORM C/OH - FR**

The Instruction Guide explains how to complete this form.

**** Complete only if "Report Type" on page 1 is marked "Final Report" ******1 C/OH NAME**

Mr Julian Castro

2 ACCOUNT # (Ethics Commission filers)**3 SIGNATURE**

I do not expect any further political contributions or political expenditures in connection with my candidacy. I understand that designating a report as a final report terminates my campaign treasurer appointment. I also understand that I may not accept any campaign contributions or make any campaign expenditures without a campaign treasurer appointment on file.

Signature of Candidate / Officeholder**4 FILER WHO IS NOT AN OFFICEHOLDER****** Complete A & B below *only* if you are not an officeholder. ******A. CAMPAIGN FUNDS**

Check only one:

☐

I do not have unexpended contributions or unexpended interest or income earned from political contributions.

☐

I have unexpended contributions or unexpended interest or income earned from political contributions. I understand that I may not convert unexpended political contributions or unexpended interest or income earned on political contributions to personal use. I also understand that I must file an annual report of unexpended contributions and that I may not retain unexpended contributions or unexpended interest or income earned on political contributions longer than six years after filing this final report. Further, I understand that I must dispose of unexpended political contributions and unexpended interest or income earned on political contributions in accordance with the requirements of Election Code, § 254.204.

B. ASSETS

Check only one:

☐

I do not retain assets purchased with political contributions or interest or other income from political contributions.

☐

I do retain assets purchased with political contributions or interest or other income from political contributions. I understand that I may not convert assets purchased with political contributions or interest or other income from political contributions to personal use. I also understand that I must dispose of assets purchased with political contributions in accordance with the requirements of Election Code, § 254.204.

Signature of Candidate**5 OFFICEHOLDER****** Complete this section *only* if you are an officeholder ****☐

I am aware that I remain subject to filing requirements applicable to an officeholder who does not have a campaign treasurer on file. I am also aware that I will be required to file reports of unexpended contributions if, at the time I cease holding office, I retain assets purchased with political contributions or interest or other income from political contributions.

Signature of Officeholder